Approved for use through 7/31/2008. OMB 0851-0002
U.S. Peters and Trademer's Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork F	Reduction Act of	1995, no p	ersons are requ	ared to respond		description of Clari	ademark Officements	20; U.S. C 23 dispi	EPARTMENT O	F COMMERC
PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								101101120		
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL E	NTTY	OR	OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED		ACUMER	NUMBER EXTRA		RATE	FEE			
BASIC FEE (37 CFR 1.15(a))						IONIE			RATE	FEE
TOTAL CLAIMS	145		TA	T.FA			-	OR	<u> </u>	<u></u>
(37 CFR 1.16(c)) INDEPENDENT CLAIMS (37 CFR 1.16(b))			1 -57	20		``= `		OR	× 5	
(37 CFR 1.16(b)) métars 3 s (CFR 1.16(d))								OR	× 3=	
"til the difference in column 1 is less than zero, enter "O" in column 2.						**		OR	+1	
						TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Cotumn 2) (Cotumn 3)						Chan = =		OR.	OTHER	THAN
	CLAIMS		HIGHEST		1	SMALL E	NIIIY		SMALL	ENTITY
El '	REMAINING AFTER MENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADOI- TIONAL
Licus ristai	16	Minus	12			Q2.		OR I	x s =	FEE
Total pacer susception (process susception)	الك	Minus '	CH .			$\times Q$		OR	X \$=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(4))						.180		OR	+5	
5.30. A						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	Column 1)		(Calumn 2)	(Column 3)	_					
	CLAIMS EMAINING AFTER MENDMENT	,	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADOI- TIONAL		RATE	ADDI- TIONAL
Total of CPR 1.16(c) CPR 1.16(Minus	135	* 1	ł	X	FEE	O R	X 5 =	FEE
tridependent -	2	" evniM	2/1		Ì	x s =		OR OR	x s	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+, .		OR	*, ,	
1 2 2/0					_	TOTAL ADO'L FEE		OR I	TOTAL ADO'L FEE	
1.0.00	Column 1)		(Cotumn 2)	(Column 3)					•	
R	CLAIMS EMAINING AFTER IENOMENT	P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
Total .		Minus **	93	. 0	ŀ	x 8 0	FEE	_	× 3 =	FEE
Total (17 CFR L Mon)	2	Minus **	29	- 6	r	x 6 o	$\overline{}$	OR OR	× 5 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						•••	7 1	OR	+ : =	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column " If the Trighest Numb " if the Trighest Numb	er Previousty Pr	aid for IN	THIS SPACE b	less than 20 at	me					
The "Highest Number	r Previously Pale	o For (Total	d or Independe	nt) is the highest	i nu	mber found in th	e appropriate	box in ca	lumn 1	

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the emount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Potent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2

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